Fill in this information to identify your case:	
Debtor 1 Richard M. Merritts, Jr.	
Debtor 2 (Spouse, if filing) Lisa D. Merritts	
United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA	
Case number (If known) 1:17-bk-04583	Check if this is: An amended filing A supplement showing postpetition chapter
Official Form 106I	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment				
1.	Fill in your employment information.		Debto	r 1	Debtor 2 or non-filling spouse
	If you have more than one job,	Employment status*	■ Em	ployed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed		☐ Not employed
	employers.	Occupation	Labo	r	Clothing Specialist
	Include part-time, seasonal, or self-employed work.	F		rkenny Army Depot	Tractor Supply Company
Occupation may include student or homemaker, if it applies.		Employer's address	Chan	nbersburg, PA 17201	5401 Virginia Way Brentwood, TN 37027
		How long employed th	nere?	35 years	14 years 6 months
		*See Attachment for Additional Employment Information			

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 4,740.67 1,741.18 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 3. Calculate gross Income. Add line 2 + line 3. 4,740.67 1,741.18

Official Form 106I **Schedule I: Your Income** page 1

Case number (if known) 1:17-bk-04583

				For	Debtor 1		Debtor 2 or filing spouse	
	Copy	line 4 here	4.	\$	4,740.67	\$	1,741.18	_
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	919.69	\$	425.36	
	5b.	Mandatory contributions for retirement plans	5b.	\$	37.92	\$	54.16	-
	5c.	Voluntary contributions for retirement plans	5c.	\$_	189.63	\$	34.82	-
	5d.	Required repayments of retirement fund loans	5d.	\$	88.05	\$	0.00	
	5e.	Insurance	5e.	\$	684.26	\$	0.00	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	-
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	- \$	0.00	+ \$	0.00	=
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,919.55	\$	514.34	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,821.12	\$	1,226.84	-
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	_
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f. _ 0	\$_	0.00	\$	0.00	_
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	0.00	
	8h.	Other monthly income. Specify: Bricker Transportation	8h.+ -			+ \$	600.00	
		1/12 tax refund 2016	-		293.25	\$	0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	293.25	\$	600.00)
10.		ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,114.37 + \$_	1,8	26.84 = \$	4,941.21
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depen		•		chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	4,941.21
13.	Do v	ou expect an increase or decrease within the year after you file this form?	•				Combir monthly	ned y income
٠٠.		No.						
		Yes. Explain:						

Case number (if known) 1:17-bk-04583

Official Form B 6l Attachment for Additional Employment Information

Debtor		
Occupation	clothing Specialist	
Name of Employer	Tractor Supply Company	
How long employed	13 Years, 6 Months	
Address of Employer	1733 LWE	
. ,	Chambersburg, PA 17202	
Debtor		
Occupation	Home dept. assoicate	
Name of Employer	Bon Ton	
How long employed	15 Years, 0 Months	
Address of Employer	100 Chambersburg Mall	
	Chambersburg, PA 17201	
Debtor		
Occupation	School Bus Driver	
Name of Employer	Bricker Transportaion Inc.	
How long employed	3 Years, 0 Months	
Address of Employer	3258 Edenville Road	
	Chambersburg, PA 17202	

	in thin info							
FIII	in this into	rmation to identify yo	our case:					
Deb	otor 1	Richard M. N	/lerritts, .	Jr.		Check	c if this is:	
							An amended filing	
	otor 2	Lisa D. Merr	itts					ving postpetition chapter
(Spo	ouse, if filing	g)				1	13 expenses as of	tne following date:
Unit	ed States B	ankruptcy Court for the	: MIDDL	E DISTRICT OF PENNSY	LVANIA	1	MM / DD / YYYY	
	e numbe r nown)	1:17-bk-04583						
Oi	fficial	Form 106J						
Sc	chedu	ıle J: Your	 Exper	ises				12/15
Be info nur	as complormation. mber (if kr	ete and accurate as If more space is ne nown). Answer ever	possible eded, atta ry questio	. If two married people and the community is a second the community is a second to the community in the community in the community is a second to the community in the community in the community is a second to the community in the community in the community is a second to the community in the community in the community is a second to the community in the community in the community is a second to the community in the community in the community is a second to the community in the				
Par 1.	_	escribe Your House joint case?	hold					
1.	□ No. G	Go to line 2. Does Debtor 2 live	in a conor	ata hausahald2				
			iii a Sepai	ate nousenoid?				
		■ No □ Yes. Debtor 2 mus	st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	hold of Debto	or 2.	
2.	Do you	have dependents?	□ No					
	Do not li	st Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not s	tate the						□ No
		ents names.			daughter		18	Yes
					_			□ No
					Son		21	Yes
								□ No
								☐ Yes
								□ No
3.	Do your	expenses include	_					☐ Yes
	expense yourself	es of people other t fand your depende	nts? □	No Yes				
Est exp app	imate you enses as olicable da	of a date after the late.	our bankr bankrupto	uptcy filing date unless y y is filed. If this is a supp	olemental Schedule	orm as a sup J, check the	oplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
the	•	such assistance an		government assistance i cluded it on <i>Schedule I:</i> \	•		Your expe	enses
4.		tal or home owners is and any rent for th		nses for your residence. I or lot.	Include first mortgage	4. \$		1,400.00
	If not in	cluded in line 4:						
	4a. Re	eal estate taxes				4a. \$		0.00
	4b. Pr	operty, homeowner's	s, or renter	's insurance		4b. \$		0.00
		ome maintenance, re				4c. \$		100.00
_		omeowner's associat			and an extension	4d. \$		0.00
5.	Addition	nai mortgage paym	ents for ye	our residence, such as ho	me equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses page 1

Debtor Debtor	•	Case number (if known)	1:17-bk-04583
6. Ut	ilities:		
6a	. Electricity, heat, natural gas	6a. \$	400.00
6b	. Water, sewer, garbage collection	6b. \$	70.00
60	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	400.00
6d	. Other. Specify:	6d. \$	0.00
7. F c	od and housekeeping supplies	7. \$	900.00
	ildcare and children's education costs	8. \$	0.00
	othing, laundry, and dry cleaning	9. \$	75.00
	rsonal care products and services	10. \$	100.00
	edical and dental expenses	11. \$	100.00
	ansportation. Include gas, maintenance, bus or train fare.		
	not include car payments.	12. \$	400.00
13. Er	tertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
	aritable contributions and religious donations	14. \$	100.00
15. In :	surance.		
Do	not include insurance deducted from your pay or included in lines 4 or 20.		
15	a. Life insurance	15a. \$	100.00
15	b. Health insurance	15b. \$	0.00
15	c. Vehicle insurance	15c. \$	170.00
15	d. Other insurance. Specify:	15d. \$	0.00
16. Ta	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Sp	ecify:	16. \$	0.00
	stallment or lease payments:		
17	a. Car payments for Vehicle 1	17a. \$	0.00
17	b. Car payments for Vehicle 2	17b. \$	0.00
17	c. Other. Specify:	17c. \$	0.00
17	d. Other. Specify:	17d. \$	0.00
	ur payments of alimony, maintenance, and support that you did not report as		0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		0.00
	her payments you make to support others who do not live with you.	\$	0.00
	ecify:	19.	
	her real property expenses not included in lines 4 or 5 of this form or on Sch		0.00
	a. Mortgages on other property	20a. \$	0.00
	b. Real estate taxes	20b. \$	0.00
	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	e. Homeowner's association or condominium dues	20e. \$	0.00
21. O t	her: Specify: Tobacco Expenses	21. +\$	100.00
D	og Expense	+\$	100.00
Sa	vings For Emergencies	+\$	100.00
22 6	Iculate your monthly expenses		
	a. Add lines 4 through 21.	\$	4 715 00
	•	\$	4,715.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	· <u> </u>	
22	c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,715.00
23 C :	Iculate your monthly net income.		
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,941.21
	b. Copy your monthly expenses from line 22c above.	23b\$	4,715.00
20	b. Copy your monthly expenses from the 226 above.	200. Ψ	4,713.00
23	c. Subtract your monthly expenses from your monthly income.		
20	The result is your <i>monthly net income</i> .	23c. \$	226.21
	- ,	L	
	you expect an increase or decrease in your expenses within the year after y		
	r example, do you expect to finish paying for your car loan within the year or do you expect you	ir mortgage payment to incr	ease or decrease because of a
_	dification to the terms of your mortgage?		
	No.		
	Yes. Explain here:		